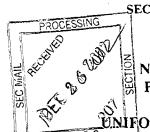
FORM D



A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

UNITED STATES
ECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

		130	12
		PROVAL	
OMB N		3235	-0076
Expires	:	May 31,	2002
Estimat	ed avera	age burde	en
hours p	errespo	nse.	16.00

SEC USE ONLY								
Serial								
EIVED								

Name of Offering (check if	this is an amendment as	nd name has ch	langed, and inc	licate change.)		
Series A Prefer	red (New)			·		
Filing Under (Check box(es) that		☐ Rule 505		☐ Section 4(6)	☐ ULOE	
Type of Filing: XX New Filing	☐ Amendment					
	A. BASI	C IDENTIFICA	TION DATA	j.		[
1. Enter the information requester	l about the issuer					
Name of Issuer (check if this	is an amendment and	пате has chan	ged, and indica	ite change.)		M 10110 01100 1100 1101 01100 11100 1
FunMail, Inc.					_	068110
Address of Executive Offices 324 Earhart Way	(Number and S , Livermore, CA	Street, City, Sta A 94550	te, Zip Code)	Telephone Numbe (925) 455-1		, Area Code)
Address of Principal Business Ope (if different from Executive Office		Street, City, Sta	te, Zip Code)	Telephone Number	er (Including	; Area Code)
Brief Description of Business						
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~	JEwall Animati	ion		•	8 8	Incrosen
	ny/Email Animat:	1011		···		A KIL A W VIOLET
Type of Business Organization G corporation	☐ limited partnership	already form	ad		1 "	JAN 0 7 2003
**		•	-	other (please sp	ecifý): .	THOMSON
☐ business trust	☐ limited partnership	o, to be formed				FINANCIAL -
Actual or Estimated Date of Inco	rporation or Organization	on: 0 5	Year 9 9	X Actual □ Es	timated	
Jurisdiction of Incorporation or C	rganization: (Enter two CN for Ca	o-letter U.S. Po anada; FN for c	stal Service abl other foreign ju	previation for State prisdiction)		Ē
GENERAL INSTRUCTIONS						
Federal: Who Must File: All issuers making et seq. or 15 U.S.C. 77d(6).	an offering of securities	in reliance on a	n exemption un	der Regulation D o	r Section 4(6), 17 CFR 230.501
When To File: A notice must be f the U.S. Securities and Exchange if received at that address after the	Commission (SEC) on t	the earlier of th	e date it is rec	eived by the SEC a	at the addres	ss given below or,
Where to File: U.S. Securities and	Exchange Commission	, 450 Fifth Stre	et, N.W., Was	hington, D.C. 205	49.	. 8
Copies Required: Five (5) copies of signed must be photocopies of the	this notice must be filed	with the SEC,	one of which m	iust be manually sig		opies not manually
Information Required: A new filing	must contain all inform	nation requested	. Amendments	need only report th	e name of th	e issuer and offer-

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers;

Each general and man	nagin	g partner of p						. <u>.</u>
Check Box(es) that Apply:		Promoter	X	Beneficial Owner	XX Executive Officer	XI	Director	☐General and/or Managing Partne
Full Name (Last name first, i	f indi	vidual) L	aviı	ne, Adam				
Business or Residence Addre 324 Earhart Way,				City, State, Zip Cod 94550	le)			
Check Box(es) that Apply:		Promoter		Beneficial Owner	☐ Executive Officer	ΧX	Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual) Ma	ark	Glennon				
Business or Residence Addre 1101 Stokie Road,	ss (N Sui	umber and S te 255,	treet, No	City, State, Zip Cod	le) 60062			
Check Box(es) that Apply:		Promoter		Beneficial Owner	☐ Executive Officer	X)	Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)	Rano	ly Rissman				
Business or Residence Addre 1101 Stokie Road	ss (Ni	umber and S	treet,	City, State, Zip Cod	le) 60062			
Check Box(es) that Apply:		Promoter		Beneficial Owner	☐ Executive Officer		Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual) Le	eo (Capital Holdi	ngs, LLC			
Business or Residence Addre	,			• • •	•			
Check Box(es) that Apply:		Promoter		Beneficial Owner	☐ Executive Officer		Director	☐General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)			***			
Business or Residence Addre	ss (N	umber and S	treet,	City, State, Zip Cod	le)			
Check Box(es) that Apply:		Promoter		Beneficial Owner	☐ Executive Officer		Director	□General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)			•	<u>-</u>		
Business or Residence Addre	ss (N	umber and S	treet,	City, State, Zip Cod	le)			
Check Box(es) that Apply:		Promoter		Beneficial Owner	☐ Executive Officer		Director	General and/or Managing Partner
Full Name (Last name first, i	f indi	vidual)						<u></u>
Business or Residence Addre	ss (N	umber and S	treet,	City, State, Zip Cod	le)			

Answer also in Appendix, Column 2, if filling under ULOE. 2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person and has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales osceruties in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer, or other or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ———————————————————————————————————					B. I	NEORMA	TION AB	OUT OFF	ERING		- 	~		
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering, if a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If not than five (5) persons to be listed are associated persons so f such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Check "All States" or check individual States) [AL] [AX] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [MI] [NR] [NR] [NR] [NR] [NR] [NR] [NR] [NR	1. Has	the issuer	sold, or d								?			NO.
2. What is the minimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agant of a broiler or declar registered with the SEC and/or with a state or states, list the name of the broker or declar. If more than five (5) persons to be listed are associated persons of such a broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ———————————————————————————————————			•								, , , , , , , , , , , , , , , , , , , ,		_	κ
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Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Rusiness	r Recidence	o Address	(Number	and Street	City St	te Zin Co	oda)						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Dusiness 0	resident	e Address	(14BINDEL	and Street	., City, 3ta	ite, Zip Ci	ode)	•					
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[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]	States in V	Which Pers	son Listed	Has Solic	ited or Int	ends to Sc	olicit Purch	asers				·		
	(Check	"All State	s" or chec	k individu	al States)	• • • • • • • • •	• • • • • • • • •						☐ All S	States
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1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Type of Security Offering Price Sold \$ 200K Debt \$ 200K 800K Equity ☐ Common ☑ Preferred s200,000 200,000 Convertible Securities (including warrants) 0 Partnership Interests \$_ Other (Specify _ _____) **\$_** 1.0M Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors Non-accredited Investors..... Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Type of offering Security Sold Rule 505 Regulation A..... Rule 504 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs 25,000 Legal Fees 20,000 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately)..... _____ Other Expenses (identify) ____

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

10 \$45,000

Total

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND I	JSE	OF PRO	CEEDS		
	b. Enter the difference between the aggregate offition 1 and total expenses furnished in response to "adjusted gross proceeds to the issuer."	ering price given in response to Part C - Q Part C - Question 4.a. This difference is	ues-	***************************************		s _2	955,000
	Indicate below the amount of the adjusted gross rused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth	int for any purpose is not known, furnished. The total of the payments listed must e	h an quai				
				Paymen Office Director Affilia	rs, s, &	F	Payments To Others
	Salaries and fees	(□ \$.	0) s _	0
	Purchase of real estate		□ S .	0	□	1 S _	0
	Purchase, rental or leasing and installation of	machinery and equipment	□ s .	0		3 \$	06
	Construction or leasing of plant buildings and	facilities	□ \$.	00		1 S	0
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	assets or securities of another					
	Repayment of indebtedness	(□ \$	0	=	S	0
	Working capital		.a E	0	x	s 9	55,000
	Other (specify):		□ \$.	0		.	0
			2 🗅		=] S	
	Column Totals						
	Total Payments Listed (column totals added)				<u>s</u> 955,		
		D. FEDERAL SIGNATURE	. je., i	y halfini	N., 687		: : : : :
ollo	issuer has duly caused this notice to be signed by owing signature constitutes an undertaking by the is it of its staff, the information furnished by the iss	ssuer to furnish to the U.S. Securities and	Exc	change Co	ommission	ı, up	on written r
ssu	er (Print or Type)	Signature (4)			Date	11/	loz
Van	EunMail. Inc. e of Signer (Print or Type)	Title of Signer (Print or Type)			L		
	Adam Lavine	President					
		<u> </u>					j

-ATTENTION-

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	
	262 presently subject to any of the disqualification	
	See Appendix, Column 5, for state response.	
2. The undersigned issuer hereby undertak Form D (17 CFR 239.500) at such time	tes to furnish to any state administrator of any states as required by state law.	te in which this notice is filed, a notice on
The undersigned issuer hereby undertak issuer to offerees.	es to furnish to the state administrators, upon wri	tten request, information furnished by the
limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that must the state in which this notice is filed and understate tablishing that these conditions have been satisfied	nds that the issuer claiming the availability
The issuer has read this notification and knoundersigned duly authorized person.	ows the contents to be true and has duly caused th	is notice to be signed on its behalf by the
ssuer (Print or Type)	Signature 270	Date
FunMail, Inc.	ay	10/11/02
Name (Print or Type)	Title (Print or Type)	
Adam Lavine	President	

Adam Lavine

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3		5 Disqualification					
	to non-a	d to sell accredited is in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		amount pur	investor and rchased in State C-Item 2)		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ			11							
AR		V. 14.								
CA										
со										
CT										
DE				t				-6		
DC										
FL										
GA										
Hl									· ·	
ID									,	
IL		X	Preferred	1	1M	0 '	0		Χ.	
IN										
IA							<u> </u>			
KS										
KY									ð	
LA					· · · · · · · · · · · · · · · · · · ·					
ME					.2					
MD										
MA								·		
MI										
MN										
MS						·				
МО										

1	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of investor and amount purchased in State				5 lification ate ULOE , attach ation of granted)
	(Fait I	5-1(6)11 1)	(Fart C-Itemit)	Number of	(Part	C-Item 2) Number of		(Pari i	E-Item1)
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No
МТ									313
NE									
NV		· · · · ·				1			
NH		(E.							
NJ									
NM									
NY									
NC								4	
ND								<u> </u>	
ОН									
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OR									
PA									
RI									
SC									
SD		·							
TN									
TX									
UT									
VT					-2				
VA									
WA									
wv									
wı			·						
WY				•					
PR									